

# UNION BANK OF INDIA

Good People to Bank with



<b>For Bank use only</b>	<b>BRANCH CODE</b>
Account No	
Account Type	

## ACCOUNT OPENING FORM FOR NON-RESIDENT INDIAN (NRI)

**The Branch Manager**  
Union Bank of India

I/We request you to open an account with you for which I/We furnish the following information.

PERSONAL DETAILS AND PHOTOGRAPH			
PHOTO  Please sign across	1 <sup>st</sup> APPLICANT	2 <sup>nd</sup> APPLICANT	3 <sup>rd</sup> APPLICANT
First name			
Middle Name			
Surname			
Short Name			
Date of Birth (DD/MM/YYYY)	----/----/-----	----/----/-----	----/----/-----
<b>Overseas Address</b>			
Country			
Pin			
Tel. (O)			
Tel ®			
Fax			
Mobile			
E-mail			
<b>Local Address</b>			
City			
Pin			
Tel.(O)			
Tel®			
Fax			
Mobile			
Status of Origin			
<ul style="list-style-type: none"> <li>• Indian National <input type="checkbox"/></li> <li>• Held Indian Passport <input type="checkbox"/></li> <li>• Parents/and/or Grand parents were Indian Citizens <input type="checkbox"/></li> <li>• Spouse is NRI by origin <input type="checkbox"/></li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>PASSPORT DETAILS</b>			
Passport No.			
Date & Place of Issue			
Validity			
Nationality			
<b>IN CASE ANY APPLICANT IS MINOR, PLEASE FURNISH DETAILS BELOW:</b>			
Name of Minor: _____		Name of parent/natural guardian _____	
Address of the guardian _____			
Relationship with minor	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> By Court Order(Please enclose copy) <input type="checkbox"/> Others (please specify)

<b>CHOICE OF ACCOUNT</b>			
Type of Account	Account No. (Bank use only)	Amount/ Currency	Tenure
<input type="checkbox"/> NRE – SB/FIXED/DRC/UNFIXED			
<input type="checkbox"/> NRO – SB/FIXED/DRC/UNFIXED			
<input type="checkbox"/> FCNR (B) – FIXED/DRC			
<input type="checkbox"/> UNION SMART			
<input type="checkbox"/> FLEXI DEPOSIT			
<input type="checkbox"/>			
<b>PAYMENT DETAILS</b>			
<input type="checkbox"/> Cash/USD/GBP/EUR _____			
<input type="checkbox"/> Cheque/Draft/TC No. _____, drawn on _____ Bank _____ Branch for Rs. _____ Dated _____			
<input type="checkbox"/> Transfer from Savings/Current Account No. _____			
<b>MANDATE FOR ACCOUNT OPERATION</b>			
<input type="checkbox"/> Single	<input type="checkbox"/> Either or survivor	<input type="checkbox"/> Former or survivor	
<input type="checkbox"/> Anyone or survivor	<input type="checkbox"/> Jointly by all	<input type="checkbox"/> Others (Specify)	
<b>SWEEP IN INSTRUCTIONS</b>			
In case of insufficient balance in my Savings account No. _____, please clear my cheque / allow withdrawal by transferring funds to my Savings account by breaking units of my Term Deposit Account _____.			
<b>CHEQUE BOOK REQUIRED?</b>		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>INTEREST PAYMENT INSTRUCTIONS (Fill in only if the interest is not to be renewed with the principal)</b>			
<input type="checkbox"/> Please remit by Draft/Mail Transfer/TT at mailing address fvg.me/ _____			
<input type="checkbox"/> Credit to my NRE/NRO Account No. _____ with _____ (branch)			
<input type="checkbox"/>			
<b>STATEMENT FREQUENCY</b>			
<input type="checkbox"/> Quarterly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Fortnightly	
<b>MODE OF DESPATCH</b>	<input type="checkbox"/> E-mail	<input type="checkbox"/> Courier/Post	
Whether combined statement of account is desired ? If yes, provide account type and Account No.			
<b>MAILING CHOICE</b>	<input type="checkbox"/> Overseas Address	<input type="checkbox"/> Local Address	
<b>NOMINATION REQUIRED?</b>	<input type="checkbox"/> Yes*	<input type="checkbox"/> No	
<b>FACILITIES REQUIRED?</b>			
<input type="checkbox"/> ATM Card	<input type="checkbox"/> Internet Banking	<input type="checkbox"/> Tele-Banking Facility	
* Please complete the nomination form attached herewith			
<b>DECLARATION/UNDERTAKING</b>			
I/We hereby declare that I am/we are non-resident Indian (s) of Indian nationality or origin. I/We understand that the above account (s) will be opened on the basis of the statements/declarations made by me/us and I/we also agree that if any of the statements/declaration made herein are found to be incorrect in material particulars, you are not bound to pay any interest on the deposit made by me/us. I/We agree that no claim will be made by me/us for any interest on the deposit/s for any period after the date/s of maturity of the deposits. I/We agree to abide by the provision of the Foreign Current (Non-Resident) Account/Non-Resident (External) Account/ Non-Resident (Ordinary) Account / /NRE- Unfixed deposits/Union Smart/Flexi Deposit. I/We hereby undertake to intimate you about my/our return to India for permanent residence immediately on arrival.			
I/We agree that if premature withdrawal is permitted at my/our request, the payment of interest on the deposit may be allowed in accordance with the prevailing stipulations laid down by the Bank in this regard. I/We shall not make available to any person resident in India Foreign Currency against reimbursement in Rupees or in any other manner in India. I/We confirm that all debits to my/our accounts for the purpose of investment in India and Credit representing sale proceeds of investment in India are covered either by general or special permissions of Reserve Bank of India. I/We confirm having received, read and understood the Account Rules and hereby agree to be bound by the terms and oonditions, outlines in these rules which govern the account(s) which I/We am/are opening with Union Bank of India and amendments there to make from time to time and those relating to various services including but not limited to ATM Card/Telebanking/Internet Banking. I/We understand that the bank may at its absolute discretion discontinue any of the services completely or partially without any notice to me/us. I/We agree that the bank may debit my account for service charges as applicable from time to time. I/We hereby declare that the information furnished above is true and correct to the best of my knowledge. I/We authorise the Bank to automatically renew the deposit on due date for an identical period unless instructions to the contrary from me/us is received by the Bank before maturity. I/We understand that the renewal will be in accordance with the provisions of the Reserve Bank of India Bank's Scheme in force at the time of renewal.			
All further remittances/credits may also be placed in similar deposits in the same names, for similar period and similar account operations/repayment mandate till instructions to the contrary are given specifically or till they are revoked.			

<input type="checkbox"/> <b>I/We enjoy credit facility/have Current Accounts with other bank/s.</b> (Please attach details of such facilities separately)			
<b>Name of bank &amp; branch</b>	<b>Account No.</b>	<b>Facility</b>	<b>Amount</b>
<input type="checkbox"/> <b>I/We declare that I/We do not enjoy credit facilities with other bank/s.</b>			
<input type="text"/> <b>1<sup>st</sup> Applicant's Signature</b>	<input type="text"/> <b>2<sup>nd</sup> Applicant's Signature</b>	<input type="text"/> <b>3<sup>rd</sup> Applicant's Signature</b>	
<b>INTRODUCTION / VERIFICATION OF SIGNATURE</b>			
I/We hereby authenticate signature/s of the abovenamed account holder/s Name _____ Account No. _____ <input type="text"/> Address: _____ Pin _____  <div style="text-align: right;">Signature</div> Note: Authentication of signature to be made by a Bank / Indian Embassy / High Commission / Consulate / Notary Public / Person known to the Bank.			
<b>DECLARATION IN CASE OF A MINOR ACCOUNT</b>			
I hereby declare that the date of birth is ___/___/___ of the minor who is my _____ and I am his/her natural guardian/lawful guardian appointed by the court order dated _____ (copy enclosed). I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I indemnify the Bank against the claim of the above minor for any withdrawal/transactions made by me in his/her account  <div style="text-align: right;"><input type="text"/></div> <div style="text-align: right;">Signature of Guardian</div>			
<b>For Bank Use</b>			
<b>Customer ID No.</b>			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>FOR BRANCH USE</b>			
Letters of thanks sent to introducer/customer on	Account opened by Name:	Authorized by Name:	
	<b>Signature</b>	<b>Signature</b>	
<b>LIST OF DOCUMENTS</b>			
<input type="checkbox"/> Passport Copy	<input type="checkbox"/> Work Permit/Employment Visa	<input type="checkbox"/> Recent Passport-size Photograph	

<b>Please tell us about yourself to serve you better</b>					
<b>PERSONAL INFORMATION (To be filled in by each authorized signatory)</b>					
<input type="checkbox"/> Do you have any relatives in Union Bank of India		<input type="checkbox"/> Yes		<input type="checkbox"/> No	
<input type="checkbox"/> Do you have any relations with Directors of Union Bank of India		<input type="checkbox"/> Yes		<input type="checkbox"/> No	
<b>Marital Status</b>		<input type="checkbox"/> Married		<input type="checkbox"/> Single	
<b>Dependents</b>		<input type="checkbox"/> Spouse		<input type="checkbox"/> Parents	
		<input type="checkbox"/> Children		No. _____	
		<input type="checkbox"/> Undergraduate		<input type="checkbox"/> Graduate	
		<input type="checkbox"/> Post Graduate		<input type="checkbox"/> Doctorate	
		<input type="checkbox"/> Professional			
<b>EMPLOYMENT DETAILS :</b>					
<b>Occupation</b>		<input type="checkbox"/> Skilled		<input type="checkbox"/> Unskilled	
		<input type="checkbox"/> Supervisory		<input type="checkbox"/> Managerial	
		<input type="checkbox"/>			
<b>Profession</b>		<input type="checkbox"/> Doctor		<input type="checkbox"/> C.A.	
		<input type="checkbox"/> Engineer		<input type="checkbox"/> Architect	
		<input type="checkbox"/> Software/IT			
		<input type="checkbox"/> Lawyer		<input type="checkbox"/> Journalist	
		<input type="checkbox"/> Consultant		<input type="checkbox"/>	
		<input type="checkbox"/>		<input type="checkbox"/>	
<b>Employed (Salaried) with Grade</b>		<input type="checkbox"/> Public Ltd.Co.		<input type="checkbox"/> Pvt.Ltd.Co.	
		<input type="checkbox"/> Govt.Sector		<input type="checkbox"/> Multinational	
		<input type="checkbox"/> Others			
		<input type="checkbox"/> Worker		<input type="checkbox"/> Supervisor	
		<input type="checkbox"/> Junior Mgmt.		<input type="checkbox"/> Middle Mgmt.	
		<input type="checkbox"/> Senior Mgmt.			
Employer's Name			No.of years in service		
Employer's Address					
<b>ESTIMATED INCOME</b>			<b>Rs.</b>		
<b>DETAILS OF OTHER SOURCES OF INCOME IF ANY?</b>					
<b>ANNUAL HOUSEHOLD INCOME</b>		<input type="checkbox"/> < 200,000		<input type="checkbox"/> 200,000 - 500,000	
		<input type="checkbox"/> 500,000 - 10,00,000		<input type="checkbox"/> 10,00,000 - 25 lacs	
		<input type="checkbox"/> 25 lacs & above			
<b>DETAILS OF FOREIGN COUNTRIES VISITED DURING THE LAST THREE YEARS</b>					
<b>ASSET OWNERSHIP</b>					
<b>Assets</b>		<input type="checkbox"/> Computer		<input type="checkbox"/> Cellular Phone	
		<input type="checkbox"/> House		<input type="checkbox"/> Commercial Property	
		<input type="checkbox"/> Land			
<b>Vehicles</b>		<input type="checkbox"/> Car		<input type="checkbox"/> Two wheeler	
		<input type="checkbox"/> Both (Car & Two Wheeler)		<input type="checkbox"/> None	
<b>Car</b>		Make :			Year of Purchase :
<b>Residence</b>		<input type="checkbox"/> Self owned		<input type="checkbox"/> Family Residence	
		<input type="checkbox"/> Company Provided		<input type="checkbox"/> Rented	
		<input type="checkbox"/> Purchased on loan			
<b>ESTIMATED VALUE OF ASSETS: Rs.</b>					
<b>BANKING/INVESTMENT ACTIVITIES</b>					
Other banks used		<input type="checkbox"/> Nationalized		<input type="checkbox"/> Pvt.Sector	
		<input type="checkbox"/> Co-operative		<input type="checkbox"/> Foreign	
Main Banker :					
<b>Preferred investments</b>		<input type="checkbox"/> Company Deposits		<input type="checkbox"/> Shares	
		<input type="checkbox"/> Bank Deposits		<input type="checkbox"/> Property	
		<input type="checkbox"/> Mutual Funds		<input type="checkbox"/> Gold	
		<input type="checkbox"/> PPF		<input type="checkbox"/>	
<b>LOANS</b>					
<b>Loans availed in the last three years</b>					
<input type="checkbox"/> Car		<input type="checkbox"/> Business		<input type="checkbox"/> Housing	
		<input type="checkbox"/> Durables		<input type="checkbox"/> Loans against shares	
		<input type="checkbox"/>			
<b>Loan requirements</b>					
<b>UNION BANK PRODUCTS/SERVICES AVAILED OF</b>					
<input type="checkbox"/> Union Comforts		<input type="checkbox"/> Union Miles		<input type="checkbox"/> Union Rent	
<input type="checkbox"/> Union Shares		<input type="checkbox"/> Union Gold		<input type="checkbox"/> Union Cash	
<input type="checkbox"/> Union Shiksha		<input type="checkbox"/> Union Health		<input type="checkbox"/> Union Smile	
<input type="checkbox"/> DEMAT Services		<input type="checkbox"/> Insurance		<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
<b>INTERNET ACCESS If yes</b>		<input type="checkbox"/> At Home		<input type="checkbox"/> At Office	
<b>PREFERRED REMITTANCE ROUTE TO INDIA</b>					
<input type="checkbox"/> Exchange House		<input type="checkbox"/> Bank		<input type="checkbox"/> On-line Money Transfer	
<input type="checkbox"/> Private Money Transfer		<input type="checkbox"/> Cheque			
<b>SPOUSE DETAILS</b>			<b>CREDIT CARD DETAILS</b>		
Name :			Name of issuer :		
Occupations :			Type of Card : Master/Visa/ Diners/		
E-mail ID :			Credit Limit:		
<b>DO YOU HAVE MEDICAL INSURANCE?</b>		<input type="checkbox"/> Yes		<input type="checkbox"/> No	

*NOMINATION (Nomination form DA-1)*

Nomination under Sec 45 ZA of the Banking Regulation Act, 1949 and rule 2 (I) of the Banking Companies (Nomination) Rules, 1985 in respect of bank deposit.

I/We \_\_\_\_\_  
(Name & Address)  
**nominate the following person to whom in the event of my/our/minor's death the amount of deposit in the account, particulars whereof are given below, may be returned by Union Bank of India.**  
**Branch**

Nature of Deposits	Distinguishing No	Additional details, if any	Name & Address of Nominee
Relationship with Deposit, if any	Age	If nominee is minor, Date of Birth	

@As nominee is minor on this date I/We appoint \_\_\_\_\_ to receive the amount of deposit in the account on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

Place : _____ Date : _____	Signature(s)/thumb impression of Depositor(s)
Name : _____ Address : _____	Signature of witness(es)\$

#where deposit is made in the name of a minor, the nomination should be assigned by a lawfully entitled to act on behalf of the minor  
@ Strike out if nominee is not a minor  
\$ Thumb impression (s) shall be attested by two witnesses

**ACKNOWLEDGEMENT**

Received on \_\_\_\_\_ nomination form no. DA-1 for making nomination from \_\_\_\_\_ in respect of \_\_\_\_\_  
(Name of Deposit Holder/s) (Name of the Account)

Deposit Account No. _____ Date : _____	<b>FOR UNION BANK OF INDIA</b>  <b>AUTHORISED SIGNATORY</b>
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## UNION BANK OF INDIA

<b>Signature card</b>												
<b>Branch</b>	<b>Account No.</b>											
<b>Name of Accountholder/s</b>												
<b>Photograph of Accountholder/s</b>												
<b>1<sup>st</sup> APPLICANT</b>	<b>2<sup>nd</sup> APPLICANT</b>	<b>3<sup>rd</sup> APPLICANT</b>										
<b>Signature of Accountholder</b>												
<b>Mandate for Account Operation</b>												
<input type="checkbox"/> Single	<input type="checkbox"/> Either or survivor	<input type="checkbox"/> Former or survivor										
<input type="checkbox"/> Anyone or survivor	<input type="checkbox"/> Jointly by all	<input type="checkbox"/>										
<b>For Bank use Only</b>												
Signed in the presence of	Signature captured by	Signature verified by										

